

**State Water Resources Control Board**

Division of Drinking Water

August 19, 2015  
System No.: 1503349

Mr. Ray Harmon, Env. Manager  
Wm. Bolthouse Farms, Inc.  
7200 E. Brundage Lane  
Bakersfield, CA 93307

RE: **Citation No. 03\_12\_15C\_015**  
**Violation of Title 22, California Code of Regulations, Section 64426.1,**  
**For June 2015**

Dear Mr. Harmon:

Enclosed is a Citation issued to the Wm. Bolthouse Farms, Inc. (System) public water system.

The System will be billed at the Division's hourly rate (currently estimated at \$126.00) for the time spent on issuing this Citation. The California Health and Safety Code Section 116577 provides that a public water system must reimburse the Division for actual costs incurred by the Division for specified enforcement actions, including but not limited to, preparing, issuing and monitoring compliance with a citation.

The System will receive a bill sent from the Division of Drinking Water Fee Billing Unit in August of the next fiscal year. This bill will contain fees for any enforcement time spent on the System during the current fiscal year.

If you have any questions regarding this letter and the enclosed citation, please contact Ms. Shen Huang or me at (559) 447-3300.

Sincerely,



Tricia A. Wathen, P.E.  
Senior Sanitary Engineer, Visalia District  
SOUTHERN CALIFORNIA BRANCH  
DRINKING WATER FIELD OPERATIONS

TAW/LR

Enclosures

cc: Kern County Environmental Health Department (w/o attachments)

STATE OF CALIFORNIA  
STATE WATER RESOURCES CONTROL BOARD  
DIVISION OF DRINKING WATER

IN RE: **WM. BOLTHOUSE FARMS, INC.**  
Water System No.: 1503349

TO: Mr. Ray Harmon, Env. Manager  
7200 E. Brundage Lane  
Bakersfield, CA 93307

**Issued: August 19, 2015**

**CITATION FOR NONCOMPLIANCE OF  
TOTAL COLIFORM MAXIMUM CONTAMINANT LEVEL VIOLATION  
TITLE 22, CALIFORNIA CODE OF REGULATIONS, SECTION 64426.1**

**JUNE 2015**

Section 116650 of the California Health and Safety Code (hereinafter "CHSC"), authorizes the State Water Resources Control Board (hereinafter "State Board") to issue a citation to a public water system when the State Board determines that the public water system has violated or is violating the California Safe Drinking Water Act (hereinafter "California SDWA"), (CHSC, Division 104, Part 12, Chapter 4, commencing with Section 116270), or any regulation, standard, permit, or order issued or adopted thereunder.

1 The State Board, acting by and through its Division of Drinking Water (hereinafter "Division")  
2 and the Deputy Director for the Division, hereby issues this citation pursuant to Section  
3 116650 of the CHSC to the Wm. Bolthouse Farms, Inc. (hereinafter "System") for violation of  
4 CHSC, Section 116555(a)(1) and Title 22 California Code of Regulations (hereinafter  
5 "CCR"), Section 64426.1.

6  
7 A copy of the applicable statutes and regulations are included in Appendix 1, which is  
8 attached hereto and incorporated by reference.

#### 9 10 **STATEMENT OF FACTS**

11 The System is classified as a non-transient non-community water system serving a non-  
12 transient population of approximately 1,906 persons through 16 service connections.

13  
14 The System is required to collect a minimum of 2 distribution system bacteriological samples  
15 per month. The Division received laboratory results for 7 bacteriological samples collected  
16 during June 2015 from the System. All samples were analyzed for the presence of total  
17 coliform bacteria. Two of the seven samples analyzed were positive for total coliform  
18 bacteria. None of the positive samples showed the presence of fecal coliform or *E. coli*  
19 bacteria. All water samples for coliform bacteria collected are summarized in Attachment A.

#### 20 21 **DETERMINATION**

22 Title 22, CCR, Section 64426.1, Total Coliform Maximum Contaminant Level (MCL) states  
23 that a public water system is in violation of the total coliform MCL if it collects fewer than 40  
24 bacteriological samples per month and more than one sample collected during any month is  
25 total coliform-positive.



1 The System collected 7 bacteriological samples during June 2015. The results of the  
2 analysis of 2 were total coliform positive. Therefore, the State Board has determined that  
3 the System violated Title 22, CCR Section 64426.1 during June 2015.

#### 4 **DIRECTIVES**

5 The System has completed the necessary public notification and investigation and no other  
6 directives are necessary at this time.  
7

8 The State Board reserves the right to make such modifications to the Citation as it may  
9 deem necessary to protect public health and safety. Such modifications may be issued as  
10 amendments to this Citation and shall be effective upon issuance.  
11

12 Nothing in this Citation relieves System of its obligation to meet the requirements of the  
13 California SDWA (CHSC, Division 104, Part 12, Chapter 4, commencing with Section  
14 116270), or any regulation, standard, permit or order issued or adopted thereunder.  
15

#### 16 **PARTIES BOUND**

17 This Citation shall apply to and be binding upon the System, its owners, shareholders,  
18 officers, directors, agents, employees, contractors, successors, and assignees.  
19

#### 20 **SEVERABILITY**

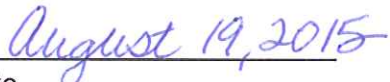
21 The directives of this Citation are severable, and the System shall comply with each and  
22 every provision hereof, notwithstanding the effectiveness of any other provision.  
23  
24  
25  
26  
27

**FURTHER ENFORCEMENT ACTION**

The California SDWA authorizes the State Board to: issue a citation with assessment of administrative penalties to a public water system for violation or continued violation of the requirements of the California SDWA or any regulation, permit, standard, citation, or order issued or adopted thereunder including, but not limited to, failure to correct a violation identified in a citation or compliance order. The California SDWA also authorizes the State Board to take action to suspend or revoke a permit that has been issued to a public water system if the public water system has violated applicable law or regulations or has failed to comply with an order of the State Board; and to petition the superior court to take various enforcement measures against a public water system that has failed to comply with an order of the State Board. The State Board does not waive any further enforcement action by issuance of this Citation.



Tricia Wathen, P.E.  
Senior Sanitary Engineer, Visalia District  
DRINKING WATER FIELD OPERATIONS BRANCH

  
Date

Certified Mail No. 7014 3490 0001 7868 8934

TAW/LR

Enclosures (6):

Appendix 1: Applicable Statutes and Regulations  
Attachment A: Summary of Distribution Bacteriological Samples  
Attachment B: Summary of Source Bacteriological Samples  
Attachment C: Public Notice for June 2015  
Attachment D: Proof of Notification Form  
Attachment E: Positive Total Coliform Investigation report



# Bacteriological Distribution Monitoring Report

**1503349 Wm. Bolthouse Farms, Inc.**
*Distribution System Freq: 2/M*

Sample Date	Location	T Coli	E Coli	F Coli	HPC	Type	Cl2	Cl2 Avg	Viol. Type	GWR Satisfied?	Comments
7/14/2015	1ROU-Northside of N-Plant	A	A			Routine	0.2				
7/14/2015	North Guard Hse	A	A			Routine	<0.1				
7/14/2015	5ROU-Soaker Sump	A	A			Routine	<0.1				
7/14/2015	4ROU-Eng. Brkrm	A	A			Routine	0.1				
7/14/2015	2-ROU-Food Service	A	A			Routine	0.3				
7/14/2015	3ROU-Front Ofc Lunchroom	A	A			Routine	0.3				
6/10/2015	East Tank Dist. Syst.	<1	<1			Repeat				Yes	
6/10/2015	West Tank Dist. Syst.	<1	<1			Repeat					
6/10/2015	NSL High Pressure	3.1	<1			Repeat			MCL		
6/10/2015	North of NSL	<1	<1			Repeat					
6/10/2015	Fresh Logistics Rm.	<1	<1			Repeat					
6/9/2015	3ROU-Front Office Lunchroom	A	A			Routine	<0.1				
6/9/2015	1ROU-N. Side of N. Plant	P	A			Routine	<0.1				
5/12/2015	5ROU-Soaker Sump	A	A			Routine	<0.1				
5/12/2015	2ROU-Food Service Boiler Room	A	A			Routine	<0.1				
4/14/2015	4ROU-Eng. Breakroom	A	A			Routine	<0.1				
4/14/2015	1ROU-N. Side of N. Plant	A	A			Routine	<0.1				
4/14/2015	North Guard Gate	A	A			Routine	<0.1				
3/12/2015	3ROU-Front Office Lunchroom	A	A			Routine	<0.1				
3/12/2015	5ROU-Soaker Shed	A	A			Routine	<0.1				
2/10/2015	2ROU-Food Service BR	A	A			Routine	<0.1				
2/10/2015	4ROU-Eng. Breakroom	A	A			Routine	<0.1				
1/13/2015	1ROU-N. Side of N. Plant	A	A			Routine	<0.1				
1/13/2015	3ROU-Front Office Lunchroom	A	A			Routine	<0.1				

**Violation Key**

MCL	Exceeds the maximum contaminant level	MR5	Incorrect number of repeat samples as follow-up to a positive sample
MR1	No monthly sample for the report month	MR6	No source sample
MR2	No quarterly sample for the report month	MR7	No summary report submitted
MR3	Incorrect number of routine samples for the report month	MR8	Other comments and/or info
MR4	Did not collect 5 routine samples for previous month's positive sample	MR9	Cl2 not reported

## Source Bacteriological Monitoring Report

**1503349 Wm. Bolthouse Farms, Inc.**

<i>Sample Date</i>	<i>Time</i>	<i>Source</i>	<i>Sample Type</i>	<i>Test Method</i>	<i>T Coli</i>	<i>E Coli</i>	<i>F Coli</i>	<i>HPC</i>	<i>Violation</i>	<i>Comments</i>
6/10/2015	15:20	Limi Well	GWR Well	MPN	<1	<1				
6/10/2015	15:30	Nickel Well	GWR Well	MPN	<1	<1				
6/10/2015	15:40	Porter Well	GWR Well	MPN	<1	<1				

**IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER**

Este informe contiene información muy importante sobre su agua potable. **RECEIVED**  
Tradúzcalo o hable con alguien que lo entienda bien.

**Bolthouse Farms Has Levels of Coliform Bacteria  
Above the Drinking Water Standard**

JUL - 1 2015

SWRCB - DDW  
FRESNO FOB

Our water system recently failed a drinking water standard. Although this incident was not an emergency, as our customers, you have a right to know what you should do, what happened and what we did to correct this situation.

We routinely monitor for drinking water contaminants. We took 10 samples to test for the presence of coliform bacteria in June 2015. 2 of these samples showed the presence of total coliform bacteria. The standard is that no more than 1 sample per month may show the presence of coliform bacteria.

**What should I do?**

- **You do not need to boil your water or take other corrective actions.**
- This is not an emergency. If it had been, you would have been notified immediately. Total coliform bacteria are generally not harmful themselves. *Coliforms are bacteria which are naturally present in the environment and are used as an indicator that other, potentially-harmful, bacteria may be present. Coliforms were found in more samples than allowed and this was a warning of potential problems.*
- Usually, coliforms are a sign that there could be a problem with the treatment or distribution system (pipes). Whenever we detect coliform bacteria in any sample, we do follow-up testing to see if other bacteria of greater concern, such as fecal coliform or *E. coli*, are present. We did not find any of these bacteria in our subsequent testing.
- People with severely compromised immune systems, infants, and some elderly may be at increased risk. These people should seek advice about drinking water from their health care providers. General guidelines on ways to lessen the risk of infection by microbes are available from EPA's Safe Drinking Water Hotline at 1(800) 426-4791.
- If you have other health issues concerning the consumption of this water, you may wish to consult your doctor.

**What happened? What is being done?**

The distribution system has been chlorinated with Sodium Hypochlorite. We anticipate the problem will be resolved by June 22, 2015

For more information, please contact Eric Brazeel at 7200 E Brundage Ln, Bakersfield Ca, 93307

*Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this public notice in a public place or distributing copies by hand or mail.*

**Secondary Notification Requirements**

Upon receipt of notification from a person operating a public water system, the following notification must be given within 10 days [Health and Safety Code Section 116450(g)]:

- **SCHOOLS:** Must notify school employees, students, and parents (if the students are minors).
- **RESIDENTIAL RENTAL PROPERTY OWNERS OR MANAGERS** (including nursing homes and care facilities): Must notify tenants.
- **BUSINESS PROPERTY OWNERS, MANAGERS, OR OPERATORS:** Must notify employees of businesses located on the property.

This notice is being posted by Bolthouse Farms.

Date distributed: 6/21/15



RECEIVED

JUL - 1 2015

SWRCB - DDW  
FRESNO FOB**PROOF OF NOTIFICATION**  
(Return with copy of the Notice)

As required by Section 116450 of the California Health and Safety Code, I notified all users of water supplied by the **Wm. Bolthouse Farms, Inc. (1503349)** of the failure to meet the **total coliform bacteria MCL** for the month of **June 2015** as directed by the Division. At least one primary distribution method is required: mail, hand-delivery or posting in conspicuous locations. A second method is also required in order to reach persons not likely to be reached by a mailing, direct delivery or posting:

Notification was made on 6/21/15  
(date)

To summarize report delivery used and good-faith efforts taken please check all items below that apply and fill-in where appropriate:

- ☐ The notice was distributed by mail delivery to each customer served by the water system.
- ☐ The notice was distributed by direct delivery to each customer served by the water system. Specify direct delivery method(s) used: \_\_\_\_\_
- ☐ Publication of the notice in a local newspaper or newsletter of general circulation (attach a copy of the published notice, including name of newspaper and date published).
- XX Posted the notice at the following conspicuous locations served by the water system (if needed, please attach a list of locations). Please see attached list.
- ☐ Email message to employees or students. \_\_\_\_\_
- ☐ Other method used to notify customers. \_\_\_\_\_

**DISCLOSURE:** Be advised that Section 116725 and 116730 of the California Health and Safety Code state that any person who knowingly makes any false statement on any report or document submitted for the purpose of compliance with the attached order may be liable for a civil penalty not to exceed five thousand dollars (\$5,000) for separate violation for each day that violation continues. In addition, the violators may be prosecuted in criminal court and upon conviction, be punished by a fine of not more than \$25,000 for each day of violation, or be imprisoned in the county jail not to exceed one year, or by both the fine and imprisonment.

Certified by Name and Title: Eric Brazeel Water Distribution Manager

Date: 6/25/15 Signature: 

Due to the Division of Drinking Water within 10 days of notification to the public  
Total Coliform MCL Failure / Enforcement Action No.: In progress

THE POSTINGS WERE AT THE FOLLOWING LOCATIONS

ALL ENTRY DOORS AT ALL FACILITIES

ALL BATHROOM DOORS

ALL BREAKROOM DOORS

RECEIVED

JUL - 1 2015

# POSITIVE TOTAL COLIFORM INVESTIGATION

## Simple Well with Pressure Tank Systems

This form is intended to assist public water systems in completing the investigation required by the Division of Drinking Water (Section 64426(b) of Title 2, S.W.A.C.B. - D.D.W. California Code of Regulations) and may be modified to take into account conditions unique to the system.

SWACB - DDW  
FRESNO FOB

### ADMINISTRATIVE INFORMATION

<b>PWS Name:</b>	WM BOLTHOUSE FARMS	<b>PWSID NUMBER:</b>	1503349
<b>Operator in Responsible Charge (ORC)</b>	<b>Name</b> Eric Brazeel	<b>Address</b> 7200 E Brundage Ln. Bakersfield, Ca 93307	<b>Telephone #</b> 661.204.0948
<b>Person that collected TC samples if different than ORC</b>	Jerry @ BC Labs	4100 Atlas Court Bakersfield, CA 93308	661.327.4911
<b>Owner</b>	BC Labs	4100 Atlas Court Bakersfield, CA 93308	661.327.4911
<b>Certified Laboratory for Microbiological Analyses</b>			
<b>Date Investigation Completed:</b>			
<b>Month(s) of Total Coliform MCL Failure:</b>	ONE		

### INVESTIGATION DETAILS

SOURCE	WELL (name)	WELL (name)	WELL (name)	WELL (name)	COMMENTS
	LIMI	PORTER	NICKEL		
1. Inspect each well head for physical defects and report					
a. Is raw water sample tap upstream from point of disinfection?	YES	YES	YES	YES	
b. Is wellhead vent pipe screened?	YES	YES	YES	YES	
c. Is wellhead seal watertight?	YES	YES	YES	YES	
d. Is well head located in pit or is any piping from the wellhead submerged?	NO	NO	NO	NO	
e. Does the ground surface slope towards well head?	NO	NO	NO	NO	
f. Is there evidence of standing water near the wellhead?	NO	NO	NO	NO	
g. Are there any connections to the raw water piping that could be cross connections? (describe all connections in comments)	NO	NO	NO	NO	
h. Is the wellhead secured to prevent unauthorized access?	YES	YES	YES	YES	
i. To what treatment plant (name) does this well pump?	N/A	N/A	N/A	N/A	NO TREATMENT PLANT
j. How often do you take a raw water total coliform (TC) test?	X	X	X	X	WHEN THERE IS A PRESENT IN THE DISTRIBUTION SYSTEM
k. Provide the date and result of the last TC test at this location	X	X	X	X	6/11/15 - ALL ABSENT

### DISTRIBUTION SYSTEM

	SYSTEM RESPONSES
1. What is the minimum pressure you are maintaining in the distribution system?	35 PSI
2. Did pressure in the distribution system drop to less than 5 psi prior to experiencing	NO

# POSITIVE TOTAL COLIFORM INVESTIGATION

Page 2 of 4

DISTRIBUTION SYSTEM	SYSTEM RESPONSES
the TCR positive finding.	
3. Has the distribution system been worked on within the last week? (service taps, hydrant flushing, main breaks, main extensions, etc.) If yes, provide details.	NO
4. Are there any signs of excavations near your distribution system not under the direct control of your maintenance staff?	NO
5. Did you inspect your distribution system to check for mainline leaks? Do you or did you have a mainline leak?	YES, INSPECTED. NO LEAKS
6. If there was a mainline leak, when was it repaired?	N/A
7. On what date was the distribution system last flushed?	5/09/15
8. Is there a written flushing procedure you can provide for our review?	No written program. We have a work order issued every 90 days.
9. Do you have an active cross connection control program?	YES
10. What is name and phone number of your Cross-Connection Control Program Coordinator?	ERIC BRAZEEL 661.204.0948
11. Is the review and testing of backflow prevention devices current?	YES
12. On what date was the last physical survey of the system done to identify cross-connections?	3/07/2015

SAMPLE SITE EVALUATION (Complete for all TC+ or EC+ findings)	Routine Site TC+ or EC+	Upstream Site	Downstream Site	Sample 4 (specify)
1. What is the height of the sample tap above grade? (inches)	35	42	36	
2. Is the sample tap located in an exterior location or is it protected by an enclosure?	EXTERIOR	EXTERIOR	INTERIOR	
3. Is the sample tap threaded, have a swing arm (kitchen sink) or aerator (sinks)?	NO	THREADED	AERATOR	
4. Is the sample tap in good condition, free of leaks around the stem or packing?	YES	YES	YES	
5. Can the sample tap be adjusted to the point where a good laminar flow can be achieved without excessive splash?	YES	YES	YES	
6. Is the sample tap and area around the sample tap clean and dry (free of animal droppings, other contaminants or spray irrigation systems)	YES	YES	YES	
7. Is the area around the sample tap free of excessive vegetation or other impediments to sample collection	YES	YES	YES	
8. Describe how the tap was treated in preparation for sample collection (ran water, swabbed with disinfectant, flamed, etc.)	Ran water, sprayed with sodium hypochlorite	Ran water, sprayed with sodium hypochlorite	Ran water, sprayed with sodium hypochlorite	
9. Is this sample tap designated on the sampling plan submitted with this information request?	YES	YES	YES	
10. What were the weather conditions at the time of the positive sample (rainy, windy, sunny).	HOT, SUNNY	HOT, SUNNY	HOT, SUNNY	

# POSITIVE TOTAL COLIFORM INVESTIGATION

Page 3 of 4

SAMPLE SITE EVALUATION (Complete for all TC+ or EC+ findings)		Routine Site TC+ or EC+	Upstream Site	Downstream Site	Sample 4 (specify)

GENERAL OPERATIONS:	Response
1. Where there any power outages that affected water system facilities during the 30 days prior to the TC+ or EC + findings?	NO
2. Where there any main breaks, water outages, or low pressure reported in the service area where TC+ or EC+ samples were located.	NO
3. Does the system have backup power or elevated storage?	NO
4. During or soon after bacteriological quality problems, did you receive any complaints of any customers' illness suspected of being waterborne? How many?	NONE
5. What were the symptoms of illness if you received complaints about customers being sick?	N/A

## ADDITIONAL INFORMATION TO BE SUBMITTED WITH RESPONSES TO THE ABOVE QUESTIONS

1. Sketch of System showing all sources, treatment locations, storage tanks, microbiological sampling sites and general layout of the distribution system including the location of all hazardous connections such as the wastewater treatment facility.
2. A set of photographs of the well, pressure tanks, and storage tanks in the system may be submitted if they would show that the contamination is directly related and changes have been made since the last inspection by our Department
3. Name, certification level and certificate number of the Operator in Responsible Charge.
4. Copy of the last cross connection survey performed that identifies the location of all unprotected cross connections.

**SUMMARY:** BASED ON THE RESULTS OF YOUR INVESTIGATION AND ANY OTHER INFORMATION AT YOUR DISPOSAL, WHAT DO YOU BELIEVE TO BE THE CAUSE OF THE POSITIVE TOTAL COLIFORM SAMPLES FROM YOUR PUBLIC WATER SYSTEM?

After our investigation and looking at all information available to us, we were unable to determine a reason for the positive samples.



POSITIVE TOTAL COLIFORM INVESTIGATION

Page 4 of 4

**CERTIFICATION:** I CERTIFY THAT THE INFORMATION SUBMITTED IN RESPONSE TO THE QUESTIONS ABOVE IS ACCURATE TO THE BEST OF MY PROFESSIONAL KNOWLEDGE

NAME: \_\_\_\_\_

TITLE: Water Dist Manager

DATE: 6/25/15